

Emergency Treatment for Opioid Overdose

BACKGROUND

Fatal and non-fatal overdoses from opioids play an increasing role in the mortality and morbidity of Vermonters. In 2013, the Vermont Legislature tasked the Vermont Department of Health (VDH) with developing and administering a statewide pilot program for distributing emergency overdose rescue kits to people at risk of an overdose, and to family members and others who may be in a position to help in the event of an overdose.

The opioid antagonist medication Vermont has selected is naloxone hydrochloride, also known by the trade name Narcan®. Opioid antagonists are safe and effective medication that quickly reverses the life-threatening effects of an opioid overdose. Naloxone is administered by spraying a fine mist up the person's nostrils.

In late 2013 the VDH began distributing Overdose Rescue Kits with nasal naloxone (Narcan®). Each Overdose Rescue Kit contains two doses of naloxone. Naloxone usually acts dramatically, allowing slowed or absent breathing to resume. It is both safe and effective and has no potential for abuse. Naloxone has been used by paramedics in ambulances and by emergency room clinicians for decades. Direct dispensing to individual Vermonters began in December 2013, with approximately 800 kits dispensed to new clients, and an additional 600 kits dispensed as refills. As of January 2015, 2,385 kits have been distributed in Vermont in a pilot program for individual patients

http://healthvermont.gov/adap/treatment/naloxone/documents/opioid_overdose_prevention_program_faq.pdf.

STATEMENT OF PURPOSE

Schools shall be prepared to provide appropriate emergency services to promote the health and safety of individuals in need and provide for safety of by-standers and of those providing care.

DESIRED OUTCOMES

School health team response plan for life threatening emergencies includes preparations to safely manage and refer to EMS an individual with symptoms of opioid overdose. Schools will be prepared to minimize sequela of an opioid overdose.

AUTHORIZATIONS/LEGAL REFERENCES

V.S.A. 18 § 4240: *Prevention and treatment of opioid-related overdoses:*

<http://legislature.vermont.gov/statutes/section/18/084/04240>

V.S.A. 16 §1165: *Effective Discipline Measures- Alcohol and drug abuse*

<http://legislature.vermont.gov/statutes/section/16/025/01165>

V.S.A. 16 § 131 *Comprehensive Health Education*

V.S.A. 26 § 2080, the Board of Pharmacy

<https://www.sec.state.vt.us/media/663043/Adopted-Naloxone-Protocol-Jan-28-2015.pdf>

V.S.A. 26 § 28: *Professions and Occupations: Nurse Practice Act*

<http://legislature.vermont.gov/statutes/chapter/26/028>

Vermont Board of Nursing Rules:

<https://www.sec.state.vt.us/media/656823/Adopted-Clean-Rules-Dec-23-2014.pdf>

Rule Governing the Prescribing of Opioids for Chronic Pain

http://healthvermont.gov/regs/documents/opioids_prescribing_for_chronic_pain_rule.pdf

Vermont Agency of Education: 2121.5 Tiered System of Support [Education Quality Standards](#) p. 14
http://education.vermont.gov/documents/EDU-FinalEQS_AsAdopted.pdf

Vermont Secretary of State: Vermont Board of Pharmacy - Protocol for Dispensing Naloxone Kits
<https://www.sec.state.vt.us/media/663043/Adopted-Naloxone-Protocol-Jan-28-2015.pdf>

REQUIRED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLES

Health services, including health appraisal and counseling, communicable disease control, mental health, and emergency and first aid care, shall be made available in a confidential manner to students in each school.

Health services shall be delivered in accordance with the school district's written policies and procedures, which shall be developed in collaboration with parents and community health resources.




RECOMMENDED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLE

- Identify resources for learning about opioid use and abuse, to learn the signs and symptoms, training, emergency treatment and safety needs, skill and equipment needs, and outline the process for notifying EMS and monitoring of unconscious individuals related to opioid overdose.
- Identify stakeholders who will participate in developing and incorporating naloxone into the supervisory/school district's health services and overall substance abuse prevention program:
 - Administration
 - Students and their family/caregivers
 - Risk management team
 - Student Assistance Program staff
 - Community services and medical providers
- Identify and evaluate competencies and capacity of school response team members
 - Identify those trained to provide restraint for any person/student in the school who has a violent behavioral reaction per the school's written procedures.
 - Identify School response team trained and qualified to administer naloxone
- Identify school prevention programs and follow up/ referral systems
- Outline documentation and follow up procedures that should occur after such an event that includes family centered care, referrals, and a school reentry process.
- Obtain a prescription from the school's consulting physician for the school; have it filled at a pharmacy near you.

RESOURCES

Massachusetts Department of Health [image only, not available on-line]

<https://neushi.org/student/programs/attachments/MaterialsforNarcan.pdf>

	core-competencies-for-naloxone-pilot-p...	6/13/2014 7:43 AM
	School Nurse Narcan Training Power Poi...	8/29/2014 11:09 AM
	Training of Naloxone Administration by (...)	6/13/2014 7:38 AM

These will be posted on-line. If you have questions please contact Sharonlee Trefry, State School Nurse Consultant, sharonlee.trefry@state.vt.us.

National Association of School Nurses:

- *Emergency Preparedness and Response in the School Setting - The Role of the School Nurse* (2014)
<http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatementsFullView/tabid/462/smId/824/ArticleID/117/Default.aspx>
- *Drug Testing in Schools* (2013)
<http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatements/tabid/237/smId/824/ArticleID/568/Default.aspx>
- *Mental Health of Students* (2013)
<http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatementsFullView/tabid/462/smId/824/ArticleID/36/Default.aspx>

Naloxone: can be purchased through a local pharmacy.

Stopping an Invisible Epidemic: *Legal Issues in the Provision of Naloxone to Prevent Opioid Overdose*
http://prescribetoprevent.org/wp-content/uploads/2012/11/burris_stoppinganinvisibleepidemic.pdf

Vermont Department of Health

- *Community-based Pilot Sites:*
<http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#pilots>
- *Overdose Prevention Kit Enrollment and Training Resources:*
<http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#kit>
- *Treating Opioid Dependence:*
<http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#treatment>
- *Contact Information:* <http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#contact>
- *Opioid Overdose Prevention Pilot Program Fact Sheet:*
http://www.healthvermont.gov/adap/treatment/naloxone/documents/opioid_overdose_prevention_program_faq.pdf


Vermont Emergency Management: *Vermont School Crisis Planning Guide:*
http://vem.vermont.gov/preparedness/school_crisis

SAMPLE POLICIES, PROCEDURES, AND FORMS**Vermont Department of Health**


Data Brief: Naloxone Enrollment and Refill Forms:

http://www.healthvermont.gov/adap/treatment/naloxone/documents/data_brief_pilot_kit_distribution_and_refill.pdf

VDH - Training and Prescriber Resources

Brochure: Overdose Rescue Kit - How to give nasal spray naloxone for suspected opioid overdose 

http://www.healthvermont.gov/adap/treatment/naloxone/documents/naloxone_od_rescue_howto_brochure.pdf

Prescriber Memo: Recommended formulation of naloxone suitable for public access/use 

http://www.healthvermont.gov/adap/treatment/naloxone/documents/naloxone_prescriber_memo_2014_02.pdf

Training Module: Statewide Opioid Antagonist Pilot Program — Intranasal Naloxone Administration: go to <http://healthvermont.gov/adap/treatment/naloxone/index.aspx#kit>

[[PDF slides only](#) ] [[PDF with notes](#) ] [[PPT](#) ]

[Emergency Medical Services \(EMS\)-specific Training Options](#)

FAQ: Frequently Asked Questions

1. What is an opioid; what does an individual look like who has overdosed?
 - a. See [Opioid Addiction and Treatment](#):
<http://www.healthvermont.gov/adap/treatment/opioids/index.aspx>
2. How do we assess for opioid over dose?
 - a. See [Treating Opioid Dependence](#):
<http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#treatment>
3. What training is needed? Provided by whom?
 - a. [Treating Opioid Dependence](#):
<http://www.healthvermont.gov/adap/treatment/naloxone/index.aspx#treatment>
 - b. Using the VDH resources listed in this document; become familiar with the procedure. You may contact your local EMS or police department for training.
4. Who writes the prescription?
 - a. The school nurse will collaborate with a local medical prescriber to obtain the prescription. The pharmacist will fill it; the school pays for the naloxone and the kit for two administrations.
 - b. To date, Vermont prescribers have been very helpful in prescribing this and can do it for schools.
5. What nursing skills are needed?
 - a. Monitoring of a non-responsive person in or near coma; CPR skills,
 - b. Use nursing assessment to determine the need for care, implement emergency response and provide guidance for the family and student to receive on-going referrals and treatment.

6. How do the skills differ between that of the school nurse observing a non-responsive person and that of a community adult, school staff or other unlicensed person observing a non-responsive person?
 - a. The unlicensed lay person only needs to follow the instructions of the nurse or of their community instruction training. They perform a task, call 911, follow a protocol designed by someone else and document their actions. The unlicensed lay person responds to problems follows the guidance of others.
 - b. The RN and the unlicensed person do different things based on the nurse's critical thinking of the situation. The nurse uses nursing assessment skills to monitor, provide a (nursing) diagnosis, identify the expected outcomes, plan how to reach desired outcomes, provide nursing interventions, perform the tasks and documents and evaluates the results.
7. What equipment is needed? Medication and naloxone kit for two administrations: kit contains syringe and nasal adapter (see VDH resources above)
8. Where do I obtain the naloxone and the nasal syringe administration kits?
 - a. The naloxone is obtained by prescription, ask your consulting school physician.
 - b. Naloxone is not available to schools from the [Vermont Department of Health, Naloxone](#) Pilot project:
http://healthvermont.gov/adap/treatment/naloxone/documents/opioid_overdose_prevention_program_faq.pdf
9. How do I keep unconscious individuals safe, while waiting for EMS?
 - a. Follow CPR guidelines and ensuring that a school staff person certified in CPR is available at all times:
 - b. Follow your school's written procedure for notification of EMS and monitoring an unconscious individual.
[Crisis Codes: Vermont School Crisis Planning Team:](#)
http://vem.vermont.gov/sites/vem/files/School_Crisis_Codes_061014.doc
10. How do I keep the persons caring for the unconscious individual safe?
 - a. Follow your school's written procedure for any school behavioral crisis including the use of restraints if needed.
11. Who are the stakeholders? Identify:
 - a. Stakeholders at your school, school community, and medical home providers
 - b. Who can assist the nurse
 - c. What to do if there is no nurse
 - d. EMS and law enforcement members are certified in administration of naloxone.
 - i. Many Vermont citizens are now trained to administer naloxone by nasal route, even if there is no nurse on hand, a community member may be in the building who can administer.
12. What is the follow up?
 - a. Follow your school's written procedure for the follow up after EMS leaves, for students, parent/caregivers, school personnel, documentation, and systems evaluation.
13. What legal questions relate to this situation?
 - a. See 18 V.S. A. § 4240 for legal protections for the administering health professional and for the person reporting that someone is unconscious from a suspected overdose.

- b. In 2013, the Vermont Legislature passed Act 75, which allows health care professionals acting in good faith to prescribe, dispense, and distribute an opioid antagonist to a person at risk of experiencing an opioid overdose or a family member, friend, or other person in a position to help such a person, so long as the recipient of the opioid antagonist has completed a prevention and treatment training program approved by the Department of Health. Unless acting recklessly, with gross negligence or intentional misconduct, a health professional who prescribes, dispenses, or distributes an opioid antagonist under this section shall be immune from civil or criminal liability regardless of whether the opioid antagonist was administered by or to the person for whom it was provided. See 18 V.S.A. § 4240(c) for more details.
- c. Similarly, a person who has received an opioid antagonist is free from civil or criminal liability for administering it to a person who he or she believes is experiencing an opioid-related overdose so long as the person does not act recklessly, with gross negligence or intentional misconduct. If medical assistance has not yet been sought, a person shall call emergency services after administering an opioid antagonist.

CONTACT INFORMATION:

- **Your local EMS station**
- **Emergency Medical Services**, Vermont Department of Health, 108 Cherry Street, Burlington, VT 05401,
Email: **Vermont EMS:** vtems@vermont.gov
Phone: 802-863-7310 or 1-800-244-0911 (in Vermont), Fax: 802-863-7577